

SERIAL NUMBER 09/241,825 REISSUE	FILING DATE 02/01/99	CLASS 514	GROUP ART UNIT 1614	ATTORNEY/ DOCKET NO. 933.001USR
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APPLICANT

MARK LYTE, EAGAN, MN.

**\*\*CONTINUING DOMESTIC DATA\*\*\*\*\***

VERIFIED THIS APPLN IS A RE OF 08/266,805 06/27/94 PAT 5,629,349  
 WHICH IS A CON OF 07/847,196 03/06/92 ABN  
 WHICH IS A CIP OF 07/753,709 09/03/91 ABN  
 WHICH IS A CIP OF 07/730,485 07/16/91 ABN

**\*\*371 (NAT'L STAGE) DATA\*\*\*\*\***

VERIFIED

YES

*January  
11  
2006*

**\*\*FOREIGN APPLICATIONS\*\*\*\*\***

VERIFIED

None

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 03/24/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY MN	SHEETS DRAWING 16	TOTAL CLAIMS 25	INDEPENDENT CLAIMS 5
Verified and Acknowledged		Examiner's Initials	Initials		

ADDRESS

MARK A LITMAN  
 SCHWEGMAN LUNDBERG WOESSNER & KLUTH  
 1600 TCF TOWER  
 121 SOUTH EIGHTH STREET  
 MINNEAPOLIS MN 55402

TITLE

COMPOUNDS FOR MODULATING GROWTH OF INFECTIOUS AGENTS

FILING FEE RECEIVED  \$1,108	FEES: Authority has been given in Paper. No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____
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